24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)				PAGE 1 FOR SE OF	OF 3 FORM 24/48
NAME OF COMMITTE (In Full)			FEC ID	ENTIFICATION	ON NUMBER ▼
L(CV Victory Fund		С	C00486845	
Check If 24-hour report					Y Y Y Y Y
	Full Name (Last, First, Middle Initial) of Payee Chapman Cubine Adams + Hussey [MEMO ITEM] Mailing Address 1600 Wilson Blvd Ste 300	Date	09 nt	19	^Y 2012
	City State Zip Code Arlington VA 22209				333.35
	Purpose of Expenditure Estimate:Telemarketing - Admin Fees Category/ Type Name of Federal Candidate Supported or Opposed by Expenditure:	Office Soug		House Senate President	State: CT
	Christopher S. Murphy	Check One:	neck One: Support Oppose		
	Calendar Year-To-Date Per Election for Office Sought	Disbursement 2012 Of	nt For: [ther (spe	Primary ecify) •	General
	Full Name (Last, First, Middle Initial) of Payee ComNet Marketing Group Inc. [MEMO ITEM] Mailing Address 1214 Stowe Ave	Date	09 /	19	^Y 2012
	City State Zip Code Medford OR 97501		-) · F0D57F35	5363.82 6 739340D9B47
	Purpose of Expenditure Estimate:Telemarketing Calls Category/ Type	Office Soug		House Senate	State: CT District:
	Name of Federal Candidate Supported or Opposed by Expenditure: Christopher S. Murphy	Check One:	×	President Support	Oppose
	Calendar Year-To-Date Per Election for Office Sought	Disburseme 2012 O	nt For: [ther (spe	Primary	General
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expenditures					
	(c) TOTAL Independent Expenditures	· [
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	Patrick Collins [Electronically Filed] Date Signature	09	21	/ Y Y 201	2
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